

### MISSOURI DEPARTMENT OF HEALTH STATE PUBLIC HEALTH LABORATORY

### **DATAMASTER MAINTENANCE REPORT**

RECEIVED DHSS Breath Alcohol Program
By Carol Day at 8:14 am, Mar 12, 2010

Complete this report in duplicate at the is repaired. Send copy to Department of	e time of the regular r Health; retain original i	nonthly preventive	maintenance ch	neck, and whenever instrument
DATAMASTER SN 990043				DATE OF INSPECTION
LOCATION OF INSTRUMENT (STREET AND CITY)				3.6.10 TIME OF INSPECTION
Branson west PD.	110 Silver LAC	4 LN. Brans	enwest, na	10:51
CHECKLIST: Place a check (<) to the le	eft of each item if foun-	d to be satisfactory	or if operating	within established limits (Write
in observed values where determined.) U		e corrected before	using instrumen	
DIAGNOSTIC CHECK (PRINTOUT	ATTACHED)			
COMPUTER OK		DETECTOR	OK	
D PROGRAM OK		G-FILTERS	OK	
HEATERS SAMPLE CHAMBER	49 °C OK	QUARTZ STA	NDARD OK	
FLOW DETECTOR OK		CALIBRATION		
D PUMP HIGH SPEED OK		PRINTER	OK	
DINDICATOR LIGHTS OK			<b>\</b>	
TIME AND DATE 10:51	3-6-20			
SIMULATOR TEMPERATURE (34 °C		C		
T CALIBRATION CHECK - OK	, 37. <u>0</u>			
Run three tests using a standard so	olution. All three tests	must be within ±	5% of the stan	dard value and must have a
spread of .005 or less. Check the bo	x corresponding to the	standard solution	being used. (P	RINTOUT ATTACHED) (USE
RECIRCULATION PUMP)				
☐ 0.100% STANDARD - MUST REAL				
(ONLY ONE STANDARD IS TO BE U				
TEST 1 . 09 Ce	TEST 2	096	TEST 3	.096
PERFORM R.F.I. TEST (PRINTOUT A	TTACHED) PASS			
NUMBER OF REFUSALS, SINCE LAS	T MAINTENANCE REP	ORT, AND NUMBE	R OF BREATH 1	ESTS IN EACH RANGE AS
FOLLOWS: (DO NOT INCLUDE SIN	MULATOR TESTS)			
		.1014)	F	(Over .19)
List any new parts and describe any alter	ration or modification t	hat was made to re	estore the instru	ment to operate satisfactorily
and within established limits (use other sid	• • •	o Deat o	F Has 146	Speck
Instrument is operation	9 0111	10. Dept o	n really	JPCC3
Guth 10% Lot #	M350 5	-1 A - C - D -		2012 11150 0 10
<u> </u>	09350 8	NIGO DECE	wper- 11-	3011 11:59 P.M
INSPECTING OFFICER				
SIGNATURE		PRINT NAME		
TYPE II PERMIT NUMBER/EXPIRATION DATE		L. TAY	16r	
920190 8-13-11	•	TELEPHONE NUMBER 417-27	2-3400	



### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 09380 of

Alcohol Reference Solution for Simulator were analyzed by

gas chromatography on January 4, 2010, using a Perkin Elmer Gas

Chromatograph Autosystem XL S/N: 610N9030209, and found to contain

0.1207% (w/vol) ethyl alcohol. The expiration date for this lot

number is December 17, 2011 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability: Testing was conducted using Cerilliant Reference Standard lot number FN102408-02 whose values are traceable to NIST. All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

# State of Missouri DEPARTMENT OF HEALTH



## 



LLOYD TAYLOR

calibrate, perform field repairs, and operate the following breath analyzer(s): is hereby authorized to instruct and supervise operators, train instructors, inspect,

### DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

MO 580-0771 (7-88) Expires \_08/13/2011 Number 920190 08/13/09 CA CLY Director of State Public Health Laboratory Director, Department of Health Interim Director Lub. 4 (R7-08)

Face This Side Down - This Edge In First

### **BAC DataMaster Evidence Ticket**

STATE OF MISSOURI BRANSON WEST POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 990043 93/96/19 19:51

--- DIAGNOSTIC CHECK ---

COMPUTER:

OKAY

PROGRAM (04-07-2009):

OKAY

HEATERS

SAMPLE CHAMBER:

49c

FLOW DETECTOR:

OKAY

PUMP

HIGH SPEED:

OKAY

DETECTOR:

OKAY

FILTERS:

OKAY

QUARTZ STANDARD:

OKAY

CALIBRATION:

OKAY

PRINTER TEST

!"#\$%&^()\*+,-./0123456789:;<=>?@ABCDEFG HIJKLMMOPQRSTUVWXYZI\J^\_'abcdefahijklmno Parstuvwxuz(|)>+

Operator Signature

Face This Side Down - This Edge In First

### BAC DataMaster **Evidence Ticket**

STATE OF MISSOURI BRANSON WEST POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 990043 93/06/19

ARREST TIME: 10:10 SUBJECT MAME: TAYLOR SEX: M DOB: 09/11/72 STATE/D.L.: MO/123456789 ARRESTING OFFICER: TRYLOR/L OFFICER I.D.: 306 TESTING OFFICER: TRYLOR/L OFFICER I.D.: 306 PERMIT NUMBER: 920190 EXPIRATION DATE: 08/13/11 MISCELLANEOUS DATA: RADIO INTERFERENCE M/A

--- BREATH AMALYSIS ---

BLANK TEST INTERMAL STANDARD RADIO INTERFERENCE

.000 11:12

**VERIFIED** 11:12

Operator Signature

### Face This Side Down - This Edge In First

### **BAC DataMaster**Evidence Ticket

### STATE OF MISSOURI BRANSON WEST POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 990043 03/06/10

TESTING OFFICER:
TAYLOR/LLOYD
OFFICER I.D.: 306
PERMIT NUMBER: 920190
EXPIRATION DATE: 08/13/11
MISCELLANEOUS DATA:
MAINTENANCE
N/A

### --- SUPERVISOR MODE ---

BLANK TEST	.000	11:06
INTERNAL STANDARD	WERIFIED	11:06
EXTERMAL STANDARD	.096	11:06
BLANK TEST	.000	11:97
EXTERNAL STANDARD	. 8 <del>9</del> 6	11:07
BLANK TEST	. 000	11:08
EXTERNAL STANDARD	.096	11:08
HI ANK TEST	. 999	11::09

M = 3 SIM. = .1 AVG. = .096

Operator Signature

& hufor

2208-02